

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		8	6-29-01
FORMALITY REVIEW	CK	1109	8-14-01
RESPONSE FORMALITY REVIEW	H-5	166	11-26-01

INDEX OF CLAIMS

✓ ..... Rejected  
 □ ..... Allowed  
 - (Through numeral)..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet-h re

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10/9/01  
 11/26/01  
 50-57